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PATENT APPLICATION FEE DETERMINATION RECORD
 Substitute for Form PTO-875
Application or Docket Number
*D9/763789***CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II*6-22-06* (Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 12	Minus ** 20	=
Independent (37 CFR 1.16(b))	* 3	Minus *** 3	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		(37 CFR 1.16(d))		

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	•	Minus **	=
Independent (37 CFR 1.16(b))	•	Minus ***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		(37 CFR 1.16(d))		

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	•	Minus **	=
Independent (37 CFR 1.16(b))	•	Minus ***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		(37 CFR 1.16(d))		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875Application or Docket Number
09/163789**CLAIMS AS FILED - PART I**

(Column 1)		(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE 37 CFR 1.16(d)		
TOTAL CLAIMS 37 CFR 1.16(d)	13	minus 20 = -7
INDEPENDENT CLAIMS 37 CFR 1.16(d)	3	minus 2 = -1
MULTIPLE DEPENDENT CLAIM PRESENT 37 CFR 1.16(d)		

SMALL ENTITY

OR	RATE	FEES
	\$	
OR	750	750
OR	x 18	-
OR	55	-
OR	+ 670	-
OR		
TOTAL		

**OTHER THAN
SMALL ENTITY**

OR	RATE	FEES
OR	750	750
OR	x 18	-
OR	55	-
OR	+ 670	-
OR		
TOTAL		

* If the difference in column 1 is less than zero, enter "0" in column 2.
ppe amend 026-01

CLAIMS AS AMENDED - PART II

(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY	
			RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7		
Independent of claims	3	minus	3	-0		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)						

AMENDMENT A	CLAMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7	
Independent of claims	3	minus	3	-0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)					

AMENDMENT A	CLAMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7	
Independent of claims	3	minus	3	-0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)					

(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY	
			RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7		
Independent of claims	3	minus	3	-0		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)						

AMENDMENT B	CLAMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7	
Independent of claims	3	minus	3	-0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)					

AMENDMENT B	CLAMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7	
Independent of claims	3	minus	3	-0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)					

AMENDMENT C	CLAMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7	
Independent of claims	3	minus	3	-0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)					

AMENDMENT C	CLAMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total of claims	13	minus	20	-7	
Independent of claims	3	minus	3	-0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 37 CFR 1.16(e)					

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 * If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".
 * If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is guaranteed by 35 USC 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and transmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or operations for sending this form, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Coordinator for PTO Forms, P.O. Box 1450, Alexandria, VA 22313-1450.

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